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ABSTRACT

The project titled "Evaluating the non-English Speaking Handicapped" was established to research existing evaluation instruments in language other than English, validate the tests as well as additional translations where needed, and develop a procedural manual for distribution to utilize in evaluating non-English speaking handicapped students. The procedural manual, which is still under development, will consist of information on the following: issues involved in nonbiased assessment of non-English speaking students; assessment materials available which are validated in other languages; selection of appropriate evaluation personnel, instruments, and techniques for specific area of exceptionality; interpretation considerations in various circumstances; and forms and notification devices in other languages. Some initial procedural recommendations will address referral, determination of primary language, selection of assessment approach, and test interpretation. (SBH)

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Evaluating the non-English Speaking Handicapped

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Background

Public Law 94-142 requires that students be evaluated in their native language or mode of communication; however the issue of labeling non-English and limited English speaking students as exceptional remains a serious one.

Recent years have seen numerous litigations based on language bias of test instruments which have been used to place children. The cases include: Arreola v. Santa Ana Board of Education, Diana v. California Board of Education and Covarubias v. San Diego Unified School District (C.O.R.R.C., 1977). Most of the litigation is concerned with the fact that bilingual students are not represented in the normative samples of diagnostic tests. (Sattler, 1974)

A test is only valid to the extent that the items of the test are as common to each child tested as they were to the children upon whom the norms were based. (Sanchez, 1934, p. 766)

Mercer (1971) found that in California approximately 75% of the children in special education classes for the retarded would not have been placed if ethnic, language and socio-cultural data had been taken into account. Similar placement discrepancies involving bilingual students have been found by other studies (McGrath, 1972; Williams, 1968; Cohen, 1966).

Bryen (1976) found that psycholinguistic tests normed in English, overidentified Spanish speaking students and stated:

> many speakers of . . . Spanish face the result of being judged intellectually and linguistically inferior . . . since there are no adequate measures to assess the child's understanding of his own

language.

Translating tests developed in English into other languages may not remove language biases, it may serve to increase them (Oakland and Matuszek, 1977) especially as thorough norming of the translated test is unlikely. According to Sattler (1974), the studies which investigated translating test content or test instructions from English to Spanish, have indicated that such procedures are fraught with hazards. Sattler concludes that the need is for construction of tests in the native language with native cultural norms.

Most of the non-English evaluation literature is concerned with Spanish since Cuban, Mexican, Puerto Rican and other Hispanic students form the largest non-English home language population in the schools. However, the issues raised apply equally well to speakers of other languages and their placement in exceptional student programs.

In 1979, the State of Florida declared instrument validation and procedural guidelines to ensure non-biased evaluation of minority individuals a major statewide need. An influx of Haitian and Vietnamese students into the schools, along with smaller groups of Russian and other immigrants, compounded the evaluation dilemma already confronted when the hundreds of thousands of Cuban refugees raised the Dade County (Miami) population to one-third Hispanic. There were little or no guidelines available to determine appropriate non-biased diagnostic procedures for students from these language groups who might legitimately require exceptional student programs.

The Project

The EHA Title VI-B Project "Evaluating the non-English Speaking Handicapped" was funded to research existing evaluation instruments in languages other than English, validate these tests as well as additional

translations where needed, and develop a procedural manual for distribution to utilize in evaluating non-English speaking handicapped students.

A review was made of ERIC, Tests in Print, The Educational Testing Service Test Collection Bulletins and other United States and foreign sources to determine what non-English evaluation instruments exist. School districts, universities and other sources were contacted to determine the availability of instruments and to obtain samples for review. Instruments in Spanish (normed on Puerto Rican, Cuban or Mexican-American populations), French, Vietnamese, Russian, Hebrew and other languages were researched.

The procedural manual is being developed for use by Exceptional Student Administrators, School Psychologists, Educational Diagnosticians and Speech Therapists. It's intent is to assist in developing District procedures for the evaluation of the non-English speaking handicapped and to provide information on material availability for specific diagnostic usages as well as recommendations for examiner selection, notification in their home languages, test selection and interpretation.

Contents of the manual consist of:

1. Issues involved in non-biased assessment of non-English speaking students.
2. Assessment materials available which are validated in other languages.
3. Selection of appropriate evaluation personnel, instruments and techniques for specific area of exceptionality.
4. Interpretation considerations in various circumstances.
5. Forms and notification devices in other languages.

It is hoped that by using the manual the district will be able to locate appropriate materials for evaluation purposes, develop a list of bilingual interpreters for evaluation assistance, and notify parents appropriately. Evaluation personnel will be able to select materials which are validated and to interpret them appropriately. When no instrument exists for a particular purpose in the language involved, the evaluator will be able to select and interpret a non-language instrument or to utilize an interpreter appropriately.

The forms and notification devices in other languages include parent permission for evaluation, notice of intent to conduct an evaluation, release of information and due process notification, among others.

The manual will be modified after field testing and evaluation in all Florida School Districts. Field testing in other school districts which serve non-English speaking students is also sought.

A Spanish translation of the Peabody Individual Achievement Test is also in the process of being field tested and validated in Florida. This is a page-by-page translation which may be inserted in P.I.A.T. kits. The reading recognition, reading comprehension and mathematics subtests are covered as they are. General information has some cultural modifications and the spelling section is not included.

The field testing is being conducted through the Florida Diagnostic and Learning Resources System network. Consultants from Cuban, Mexican and Puerto Rican backgrounds are being called in to approve the translation. Some words have been given in more than one translated form to meet the specific usages of the above groups. Results of the field test will lead to needed modifications and then the product will be disseminated throughout the state. Field testing by school districts in other states with large Hispanic populations may be initiated.

Evaluation Procedures

The following are some initial procedural recommendations that will be utilized in the Florida Manual:

A. Referral. It is expected that each school will routinely utilize available support services such as psychologists, visiting teachers, counselors, remedial reading, bilingual programs and other curriculum support personnel as a means of accommodating varying student needs. Teachers and principals will call on such services when modification of the learning environment is indicated for any individual or group of students. An appropriate extension of this process is the establishment of a Child Study Team (CST), in each building, which would hold screening conferences to consider the needs and alternative instructional modifications of students presenting problems of a learning and/or behavioral nature.

There should be a written plan, prepared by the principal, on file that would indicate the functioning of the CST, specifying the frequency and circumstances for meeting to discuss alternative educational strategies for students who are exhibiting problems. Medical records, parent and teacher observations, social histories, educational progress charts and counselor reports would be the basis for determining whether proposed alternative educational strategies should focus on instituting behavior management intervention, shifting teacher assignments, restructuring curricular activities, altering classroom environments, vision/hearing/speech evaluations and their results, or instigating more parental involvement.

The primary function of the CST is to devise educational strategies for students with problems that utilize all resources at the building level before referrals are made for the formalized evaluation process by a multidisciplinary/diagnostic team. A discussion and review of strategies used may influence decisions to change, deny, continue or modify special education placement.

Every effort should be made to secure involvement of the parent in this process, and to provide this in their primary language. Among the important information they can provide are details about the student's language, educational and developmental history. The team can determine if the curriculum being used assumes that this child has developed readiness skills at home that in reality he hasn't had the opportunity to develop. It can also determine if the student has had sufficient former educational experience to be compared with other students of his/her chronological age. Details of schooling in the country of origin (when appropriate) can inform the team if the child received special services or was appropriately included in regular programs. Aspects of cultural differences which may be misinterpreted by referring teachers should be discussed.

The referral should include descriptive samples of behavior rather than opinions of the referring agent and should include supportive observations from several sources. Care should be taken to give at least a 2- or 3-month settling in period for new refugees, entrants from other countries, and kindergarten or first grade entrants from non-English speaking households before referrals are initiated. Exceptions for this should be made for students who fail hearing or vision screenings or who show evidence of severe handicapping conditions which would not permit placement in regular programs.

B. Determination of Primary Language. An important step, which is often neglected is accurate determination of a student's primary language. A Hispanic surname does not automatically indicate that a student needs evaluation in Spanish. Some students may have basic information in the home language but know academic subjects more proficiently in English. Evaluation in both languages can often be a useful diagnostic tool.

Many Spanish English language dominance tests are on the market. This

is not true for all languge groups. Some available dominance tests are included in Appendix A.

C. Selection of Assessment Approach. Florida and most other states require certain test criteria for placement in various exceptionalities. Intellectual, process area, emotional status, adaptive behavior and academic level tests are the most widely required. Although there may possibly be validated test instruments available to the examiner in some languages other than English, they are unlikely to be available in all needed areas. Several considerations need to be taken into account:

1. Every effort should be made to locate instruments that have been formally validated for the language and cultural group that is being processed. This project will provide listings of tests in various languages to interested examiners.

2. Along with the above, every effort should be made to identify diagnostic personnel familiar with the language and culture of the student involved. Lists of persons available for consultation and direct services can be developed by school districts.

3. There can be many pitfalls in using interpreters and it is advised that training sessions be planned for persons who will act in this role.

   a. The importance of direct translation should be stressed so that the interpreter is aware of the need for standardized procedures and wording.

   b. The examiner must be able to trust the interpreter for the translation needed. Prior to a session (or during the training program) the inter-

preter should be asked to give a translation of some test material and then turn it back into English to see if any extra nuances or misleading elements have crept into the material.

c. The examiner and interpreter should discuss the cultural differences of the person being tested. This helps make the examiner make proper educational inferences about test results. The interpreter may be aware of test items that will be biased against the student and can assist in interpretation when cultural elements have impact on a student's response.

d. The examiner should be acquainted with some basic cultural and background information concerning the interpreter as to his/her; native language, education, and general work or environmental experiences.

e. The interpreter should be familiar with the testing instrument to be used perhaps by browsing through materials or having the experience of taking the test.

f. If possible the interpreter for any given language should be the same person each time so that comparisons among students of the same language background can be made.

g. The examiner, along with the interpreter, should develop a list of difficult terms to be translated, based on the instruments to be used.

h. The interpreter and the person being tested should be properly introduced to each other ahead of time (especially if it is a young child).

4. A major decision will involve the choice between observations,

interviews, informal techniques, standardized behavioral techniques or a combination of the above.

Tam Dang Wei, Ph.D., Vietnamese psychologist with the Urbana, Illinois schools, recommends clinical observations for Vietnamese students (Wei, 1980). An excerpt from her paper gives a good description of this technique.

> "Perhaps a quick summary of the author's day in the school may be of some practical use for other co-workers in the field. This does not mean to be a model nor a process for a complete evaluation, but is simply a sharing of experiences and ideas.
>
> 1. Before going to school, background information has been gathered from the teachers regarding their specific concerns. Health information about the child also has been obtained.
>
> 2. A quick visit is made to teachers and school administrators to check on any possible change in the student's behavior or performance (negative or positive) since the referral date.
>
> 3. The student is followed throughout the school day. Attempt is made to observe the child in as many types of classroom activities as possible. This should include some academic works (math, reading, class discussion), some physical activities (PE, recess, art), and some special classes (ESL, speech, special reading, math, language development, library . . .). Physical education and recess are most appropriate times to assess the child's motor coordination and also to observe his/her interaction with the peer group. Special classes are observed in order to evaluate the types of services that the local schools provide in order to coordinate any further services that he/she may need.
>
> In short, notes are taken on concrete observed behaviors, performance, the child's reactions, the peer group relationship, the teacher's attitude toward the child, and his/her own self-perception.
>
> The specific concerns of the teachers are kept in mind during the observations. For example, if there is a question of emotional problems, the child's reaction to the peer group, the teacher, and the classroom atmosphere is specifically noted. If it is a question of learning difficulty, the child's academic work is assessed by asking such questions as" "What can he/she do in the class? How much did he/she get from the various lessons presented? Is it a language problem or a learning problem?"
>
> 4. Noon time is spent with the parents, preferably in their home to learn about the child's background.

5. Some time in the afternoon is spent with the child individually. Informal assessments are performed by having the child do the following: read passages in Vietnamese and in English; compute basic math operations; do free drawings or just talking in order to learn his/her reasoning ability, expressive language skills and reaction to the new school environment.

Findings are then compiled with an attempt to evaluate what he/she can and cannot do, and to look beyond his/her immediate reactions for possible underlying causes that may be related to cultural aspects as well as physical, emotional, or academic needs."

(Wei, 1980, pp 5-6)

It must be understood that for the above technique to be acceptable as a placement evaluation there would need to be changes in State rules in the many states which require standardized test procedures.

The Region 9 Task Group on non-Biased Assessment (1976) lists several questions the examiner should ask of him/herself when scoring normative tests:

a. Am I testing this child simply because I've always used tests in my assessment procedure?

b. Am I administering a particular test simply because it is part of THE BATTERY?

c. Am I administering a test because I have been directed to do so by the Administration?

d. Does the instrument I've chosen include persons in the standardization sample from this child's cultural group?

e. Are subgroup scores reported in the manual?

f. Were there large enough numbers on this child's cultural group in the test sample for me to have any reliance on the norms?

g. Does the instrument I have selected assume a universal set of experiences for all children?

h. Does the instrument selected contain illustrations that are misleading and/or outdated?

i. Does the instrument selected employ vocabulary that is colloquial, regional and/or archaic?

j. Do I understand the theoretical basis of the instrument?

k. Will this instrument easily assist in delineating a recommended course of action to benefit this child?

l. Have I reviewed current literature regarding this instrument?

m. Have I reviewed current research related to potential cultural influences on test results?

5. The use of non-language tests and developmental scales can be valuable, especially for young and severely handicapped children. Cultural factors must be taken into account with these instruments as well as more standardized ones. Children from certain cultures may not be expected, or permitted, to perform tasks at the given age level.

Adaptive benavior scales have value in measuring univeral developmental trends although they also are subject to cultural expectations. Figueroa (1980) notes that on the A.B.I.C. the Hispanic group scores significantly below the white and black groups on raw data.

D. Test Interpretation. The examiner should feel secure in his/her understanding of cultural and evaluation variables which may bias test results for non-English speaking students. In addition, examiners should analyze their own value structure and identify any personal biases they may feel toward specific groups or individual students. Unless they feel they can assess the child

fairly and without prejudice it would be best to refer the case to another evaluator.

Students who have been raised in this country should have school records including anecdotal notes and academic performances over time which can be useful in interpreting current data. Those who are new arrivals from other countries will leave the examiner with little previous information except that which can be gathered through the child's family.

The interpretation of test scores for any child requires knowledge of a variety of factors that operate to influence any particular set of scores. This constraint is well known and accepted by those individuals involved in testing and test score interpretation. Nevertheless, such extraneous influences pose special problems for the minority or culturally different child.

Rapport, for example, is critically important for testing situations. Differences in resulting test scores have been documented when the examiner has been characterized as cold versus warm in terms of interpersonal relations (Exner, 1966). Differences occurred even though the examiner and examinee belonged to the same cultural group and spoke the same native language. Where the examiner and examinee belong to different cultural groups or speak different languages, large differences may be expected. With little perceived commonality on the part of either examiner or examinee, rapport may be difficult or even impossible to establish. The whole situation is often further complicated by the presence of test anxiety. Children referred for testing in most school systems are already exceptional in some respect, usually experiencing failure in one or more areas. Test situations in general, and one on one testing situations with an

unfamiliar adult who is probably different culturally, racially or linguistically in particular may provoke extreme anxiety in the child. Unless the examiner is aware of this the child may appear to be handicapped or more severely handicapped than he/she really is, rather than anxious. True exceptionalities may remain hidden by an anxiety causing overall poor performance.

Where tests are administered in another language there may still be dialectic differences between the more formal language of the test and the language of the child. Such linguistic differences will serve to depress scores increasing the possibility of mislabeling and misclassifying children.

The above are intended to serve as isolated examples of influences that can affect the accuracy of test scores. They highlight the difficulty of the already difficult task of test scores interpretation with minority children. Test score interpretation then should be approached with caution, and must be done within the context of the testing situation as well as the characteristics of the child.

A primary difficulty in interpreting test scores of a minority child is their meaning with regard to other children. Most tests do not have norms based on minority groups, thus the development of local norms should be a high priority for the school systems. Where local norms do not exist, published norms are typically used although this practice is questionable. If such norms must be used, then the results should be reported in terms of a range, such as "falls in the average range of intelligence." It should also be clearly noted that norms used are standard norms and as such of questionable validity for the child involved. This will serve to sensitize the reader of the

report that other factors should be taken into consideration.

Among the questions one should ask are:

1. Have I examined each item missed by this child rather than merely looking at his total score?
    a. Is there a pattern to the types of items this child missed?
    b. Are the items missed free of cultural bias?
    c. If I omitted all items missed that are culturally biased, would this child have performed significantly better?
2. Am I aware that I must consider other factors in the interpretation of this child's scores?
    a. Have I considered the effect that the child's lack of rapport with me may have had on his performance?
    b. Have I considered the effect that the child's attitude and/or physical condition may have had on his performance?
    c. Does my interpretation of this child's performance include observations?
    d. Do I realize that I should report and interpret scores within a range rather than as a number?
3. What confidence do I have in this child's test scores?
    a. Are test scores the most important aspect of this child's evaluation?
    b. Will I allow test scores to outweight my professional judgement about this child?

(Region 9 Task Group on non-Biased Assessment, 1976, p. 4)

In sum, it should be clear that interpretation of test scores of minority children is a difficult task. Best assessment can be made when a

variety of instruments are used that assess the child's functioning in a variety of situations and in a variety of ways. Ideally, the child's proficiency in the language of the test, his/her health history, functioning in spheres other than school and any other available measures should be used to develop a complete picture of the child. Test scores should be interpreted using local norms or, when national norms are used, careful interpretation should be made with notes as to the inappropriateness of the norms.

It is well to remember that tests not developed for a specific population will be biased. Although tests may be biased in terms of assigning inflated scores, it is far more likely that for the minority child scores will be biased in a negative direction. Unless great care is taken in the use of assessment information this will result in many students misassigned to special education or remedial classes as well as many gifted children who will remain unrecognized. The cost of such misassignment is enormous in terms of wasted resources and human suffering on both a personal and societal level. Until better and more appropriate assessment instruments are developed, careful interpretation of test scores appears to be our greatest hope for achieving the goal of least-biased assessment.

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